

# EXHIBIT 6

## COMMON MALFORMATIONS

TABLE 1-1 *Recognized Human Teratogens (2009)*

<b>1. DRUGS</b> Aminopterin/amethopterin Androgenic hormones Angiotensin converting enzyme(ACE) inhibitors Busulfan Carbamazepine Cocaine Cyclophosphamide Cyclosporin Diethylstilbestrol Efavirenz Etrretinate Fluconazole Heroin/methadone Iodide Isotretinoin (13-cis-retinoic acid) Lamotrigine Lithium Methimazole/Carbimazole Mycophenolate mofetil Paroxetine Phenobarbital Phenytoin Propylthiouracil Prostaglandin E <sub>1</sub> (misoprostol)	Tetracycline Thalidomide Trimethadione/paramethadione Valproic acid Warfarin  <b>2. HEAVY METALS</b> Lead Mercury  <b>3. RADIATION</b> Cancer therapy  <b>4. MATERNAL CONDITIONS</b> Alcohol Insulin-dependent diabetes mellitus Hypothyroidism Iodide deficiency Maternal phenylketonuria Myasthenia gravis Obesity, severe Smoking cigarettes/marijuana Systemic lupus erythematosus Vitamin A deficiency Vitamin K deficiency	Parvovirus Rubella Syphilis Toxoplasmosis Varicella Venezuelan equine encephalitis virus West Nile virus  <b>6. PROCEDURES/ASSISTED REPRODUC</b> Chorionic Villus Sampling (CVS) Dilation and curettage (D&C) Intracytoplasmic Sperm Injection (ICSI)  <b>7. TRAUMA TO PLACENTA</b>  <b>8. OTHER EXPOSURES</b> Carbon monoxide poisoning Gasoline fumes (excessive) Heat Hypoxia Magnesium sulfate (high levels, third trimester) Methyl isocyanate Methylene blue Phthalates Polychlorinated biphenyls Toluene (excessive; glue sniffing)
	<b>5. INTRAUTERINE INFECTIONS</b> Cytomegalovirus Herpes simplex	

- against the uterus and a prominence of the occiput, the "star gazer" phenotype (Figures 1-1A and B); another example is the infant in breech presentation who has an increased risk for hip dislocation;
- b) Unicornuate uterus: a potential cause of positional deformities (6);
- c) Twins: monoamniotic, monochorionic twins are at risk for:
- i) some malformations, like acardia (7), which occur only in such twin pairs;

- ii) many malformations (8), such as sir (9) and cloacal exstrophy (10), are more in MZ twin pregnancies than in pregnancies.
- iii) if one twin dies, and the pregnancy c tissue from the deceased and autolyzed embolize to the living twin and produ malities caused by obstructing an arter bowel atresia, porencephaly, aplasia amputations (11a).

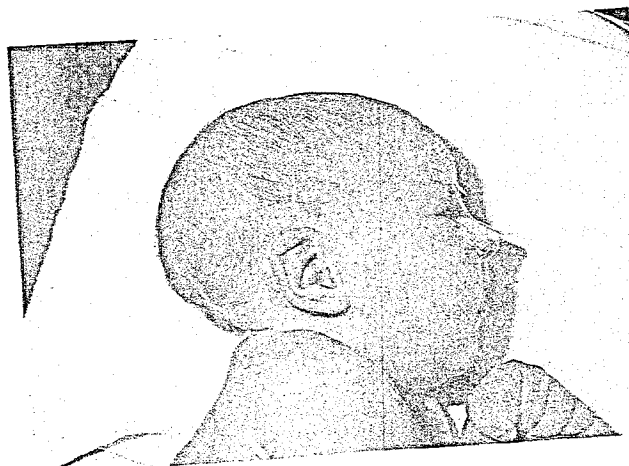


FIGURE 1.1 Shows deformations of posterior skull shape (Figure 1A) from a prolonged face and brow presentation: the More normal skull shape (Figure 1B) four months later, after no treatment.

Defendant's Exhibit

3/11/16 KB

3

ESQUIRE

OXFORD  
UNIVERSITY PRESS

Oxford University Press, Inc., publishes works that further  
Oxford University's objective of excellence  
in research, scholarship, and education.

Oxford New York  
Auckland Cape Town Dar es Salaam Hong Kong Karachi  
Kuala Lumpur Madrid Melbourne Mexico City Nairobi  
New Delhi Shanghai Taipei Toronto

With offices in  
Argentina Austria Brazil Chile Czech Republic France Greece  
Guatemala Hungary Italy Japan Poland Portugal Singapore  
South Korea Switzerland Thailand Turkey Ukraine Vietnam

Copyright © 2012 by Oxford University Press, Inc.

Published by Oxford University Press, Inc.  
198 Madison Avenue, New York, New York 10016  
www.oup.com

Oxford is a registered trademark of Oxford University Press  
All rights reserved. No part of this publication may be reproduced,  
stored in a retrieval system, or transmitted, in any form or by any means,  
electronic, mechanical, photocopying, recording, or otherwise,  
without the prior permission of Oxford University Press.

Library of Congress Cataloging-in-Publication Data

Holmes, Lewis B.  
Common malformations / Lewis B. Holmes.  
p. ; cm.

Includes bibliographical references.

ISBN 978-0-19-513602-9 (cloth : alk. paper) 1. Abnormalities, Human. I. Title.  
[DNLm: 1. Congenital Abnormalities. Q5 675 H751c 2011]  
QM691.H65 2011

616'.042—dc22

2010009172

9 8 7 6 5 4 3 2 1

Printed in USA  
on acid-free paper

# COMMON MALFORMATIONS

LEWIS B. HOLMES, MD

Professor of Pediatrics  
Harvard Medical School

Chief Emeritus  
Genetics Unit  
MassGeneral Hospital *for* Children

OXFORD  
UNIVERSITY PRESS